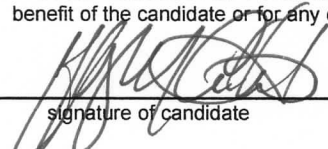
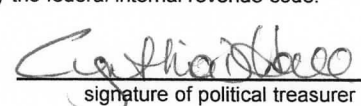

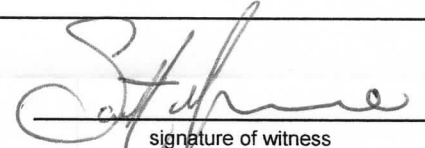


R

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates For Single-Candidate Committees

1. DATE OF REPORT 10-11-10		2.a. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO ELECT JEFF ATHERTON		
2.b. IF COMMITTEE, NAME OF CANDIDATE JEFF ATHERTON		3. ELECTION DATE AUG 5, 2010		
4.a. CAMPAIGN ADDRESS AND PHONE <div style="display: flex; justify-content: space-between;"> Street or Rural Route City State Zip Code Phone </div> 2125 HICKORY VALLEY RD CHATTANOOGA TN 37421 423-855-1755				
4.b. CANDIDATE'S HOME ADDRESS (if different than 4.a.) <div style="display: flex; justify-content: space-between;"> Street or Rural Route City State Zip Code Phone </div> 6107 MORRIS DR. HARRISON TN 37341				
5. OFFICE SOUGHT (include district number, if applicable) CHANCELLOR, PART 2		6. NAME OF POLITICAL TREASURER (may be candidate) CYNTHIA D. HALL, ESQ.		
7. CATEGORY OR REPORT (Check one) <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> FIRST QUARTER <input type="checkbox"/> SECOND QUARTER <input checked="" type="checkbox"/> THIRD QUARTER <input type="checkbox"/> FOURTH QUARTER </div> <div> <input type="checkbox"/> PRE-PRIMARY <input type="checkbox"/> PRE-GENERAL <input type="checkbox"/> MID-YEAR SUPPLEMENTAL <input type="checkbox"/> YEAR-END SUPPLEMENTAL </div> </div>				
8.a. BEGINNING DATE OF REPORTING PERIOD 7/27/10		8.b. ENDING DATE OF REPORTING PERIOD 9/30/10		
9. (Check one) a. <input type="checkbox"/> This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) b. <input checked="" type="checkbox"/> This campaign is required to file a detailed financial disclosure because contributions (including in-kind) received total more than \$1,000 and/or expenditures total more than \$1,000 for this reporting period.				
10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">  signature of candidate </div> <div style="text-align: center;"> 10/11/10 date </div> <div style="text-align: center;">  signature of political treasurer </div> <div style="text-align: center;"> 10/9/10 date </div> </div>				
11. WITNESS SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;">  signature of witness </div> <div style="text-align: center;"> 10/11/10 date </div> <div style="text-align: center;">  signature of witness </div> <div style="text-align: center;"> 10/8/10 date </div> </div>				
12. SUMMARY				
a. BALANCE ON HAND LAST REPORT		\$ <u>7348.54</u>		
b. TOTAL RECEIPTS THIS PERIOD		\$ <u>2656.00</u>		
c. TOTAL DISBURSEMENTS THIS PERIOD		\$ <u>8820.55</u>		
d. BALANCE ON HAND (12.a. plus 12.b. minus 12.c.)		\$ <u>1177.99</u>		
e. TOTAL LOANS OUTSTANDING		\$ <u>0</u>		
f. TOTAL OBLIGATIONS OUTSTANDING		\$ <u>0</u>		

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10-10


SUMMARY PAGE - CANDIDATE

13. NAME OF CANDIDATE OR COMMITTEE (In Full) <u>COMMITTEE TO ELECT JEFF ATHERTON</u>	14. REPORT COVERING THE PERIOD FROM: <u>7/27/10</u> TO: _____
--	---

RECEIPTS

15. CONTRIBUTIONS (other than loans and interest)

a. Unitemized Contributions (\$100 or less from each source this period) \$ 1150

b. Itemized Contributions (over \$100 from each source this period) \$ 1500

c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) \$ 2650

16. LOANS RECEIVED THIS REPORTING PERIOD \$ 0

17. INTEREST RECEIVED THIS REPORTING PERIOD \$ 0

18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) \$ 2650

DISBURSEMENTS

19. EXPENDITURES (other than loan payments)

a. Expenditures (\$100 or less each payee this period) (must be listed by category - e.g., printing, postage, gasoline)

	\$	<u>0</u>
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Total of Expenditures (\$100 or less each payee) \$ -0

b. Itemized Expenditures (Over \$100 each payee this period) \$ 5720.55

c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) \$ 5720.55

20. LOAN REPAYMENTS MADE THIS PERIOD \$ 3100

21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) \$ 8820.55

22. IN-KIND CONTRIBUTIONS

a. Unitemized in-kind contributions (\$100 or less from each source this period) \$ 0

b. Itemized in-kind contributions (over \$100 from each source this period) \$ 120

c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.) \$ 120

23. OBLIGATIONS

a. Unitemized Obligations Outstanding (\$100 or less each) \$ 0

b. Itemized Obligations Outstanding (Over \$100 each) \$ 0

c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown in item 12.f.) \$ 0



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD	
				FROM:	TO:
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)					Amount
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)					
First Name MARK		Middle Name		Contribution Received For:	
Last Name/Organization Name WEST				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 2315 HEAVENLY VIEW				<input type="checkbox"/> Runoff (Local Elections Only)	
City COLEMAN	State TN	Zip Code 37363	Date of Contribution 8/3/10		Amount of Contribution \$500.00
Occupation SELF EMPLOYED					Aggregate This Election \$500.00
Employer					
First Name TRICIA		Middle Name		Contribution Received For:	
Last Name/Organization Name DENNIS				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 125 LEE PARKWAY, STE B				<input type="checkbox"/> Runoff (Local Elections Only)	
City CHATTANOOGA	State TN	Zip Code 37421	Date of Contribution 8/2/10		Amount of Contribution \$200.00
Occupation ATTORNEY					Aggregate This Election \$200.00
Employer SELF					
First Name LINDA		Middle Name JONES		Contribution Received For:	
Last Name/Organization Name NORWOOD				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address PO BOX 11572				<input type="checkbox"/> Runoff (Local Elections Only)	
City CHATTANOOGA	State TN	Zip Code 37401	Date of Contribution 7/27/10		Amount of Contribution \$200.00
Occupation ATTORNEY					Aggregate This Election \$200.00
Employer SELF					
First Name RICHARD		Middle Name		Contribution Received For:	
Last Name/Organization Name SCHULMAN				<input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election	
Address 1804 CRESTWOOD DR				<input type="checkbox"/> Runoff (Local Elections Only)	
City CHATTANOOGA	State TN	Zip Code 37415	Date of Contribution		Amount of Contribution \$150.00
Occupation ATTORNEY					Aggregate This Election \$150.00
Employer PATRICK BEARD SCHULMAN & SANCOW					
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)					\$1050.00



ITEMIZED STATEMENT OF CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO ELECT JEFF AHERN		2. REPORT COVERING THE PERIOD FROM: 7/27/10 TO: 9/30/10	
3. TOTAL ITEMIZED CAMPAIGN CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page)		Amount 1050.00	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED CONTRIBUTION (contributions totaling more than \$100 from any contributor)			
First Name STEVEN	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution \$150.00
Last Name/Organization Name JACOWAY		Date of Contribution 7/27/10	Aggregate This Election \$150.00
Address 537 MARKET ST STE 202			
City CHATTANOOGA	State TN	Zip Code 37402	
Occupation ATTORNEY			
Employer PATRICK BEARD, SCHULMAN & JACOWAY			
First Name GARY	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution \$150.00
Last Name/Organization Name PATRICK		Date of Contribution 7/27/10	Aggregate This Election \$150.00
Address 6642 GRAY FRYAR RD			
City SIGNAL MTN	State TN	Zip Code 37377	
Occupation ATTORNEY			
Employer PATRICK BEARD SCHULMAN & JACOWAY			
First Name GREG	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution \$150.00
Last Name/Organization Name LEITNER		Date of Contribution 7/29/10	Aggregate This Election \$150.00
Address 736 GA AVE STE 300			
City CHATTANOOGA	State TN	Zip Code 37402	
Occupation ATTORNEY			
Employer			
First Name	Middle Name	Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election <input type="checkbox"/> Runoff (Local Elections Only)	Amount of Contribution
Last Name/Organization Name		Date of Contribution	Aggregate This Election
Address			
City	State	Zip Code	
Occupation			
Employer			
5. TOTAL ITEMIZED CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of contributions, this amount must be shown in item 15b. of summary.)			\$1500



ITEMIZED STATEMENT OF IN-KIND CONTRIBUTIONS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <i>COMMITTEE TO ELECT JEFF A. HERTOW</i>				2. REPORT COVERING THE PERIOD FROM: <i>7/27/10</i> TO: <i>9/30/10</i>		
3. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS FROM PRECEDING PAGE (enter \$0 if first itemized page) <i>\$0</i>					Amount <i>\$0</i>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED IN-KIND CONTRIBUTION (in-kind contributions totaling more than \$100 from any contributor during the period)						
First Name <i>Tracy</i>		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Value of In-Kind Contribution <i>\$120</i>
Last Name/Organization Name <i>WHITE, ATHENS DIST. CO.</i>				<input type="checkbox"/> Runoff (Local Elections Only)		
Address <i>4126 SOUTH CREEK ROAD</i>				Date of In-Kind Contribution <i>7/27/10</i>		Aggregate this Election <i>\$120</i>
City <i>CHATTAHOOCHEE</i>		State <i>GA</i>		Zip Code <i>317406</i>		Description of In-Kind Contribution <i>WINE FOR RECEPTION</i>
Occupation <i>DWELL</i>		Employer <i>ATHENS DIST. CO.</i>				
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
First Name		Middle Name		In-Kind Contribution Received For: <input type="checkbox"/> Primary Election <input type="checkbox"/> General Election		Value of In-Kind Contribution
Last Name/Organization Name				<input type="checkbox"/> Runoff (Local Elections Only)		
Address				Date of In-Kind Contribution		Aggregate this Election
City		State		Zip Code		Description of In-Kind Contribution
Occupation		Employer				
5. TOTAL ITEMIZED IN-KIND CONTRIBUTIONS (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of in-kind contributions, this amount must be shown in item 22b. of summary.)						



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE <u>A COMMITTEE TO ELECT JEFF A. HERTON</u>			2. REPORT COVERING THE PERIOD FROM: <u>7/27/10</u> TO: <u>9/30/10</u>	
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount <u>①</u>	
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)				
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <u>U.S. POSTMASTER, C/O</u>		<u>POSTAGE FOR BULK MAILING</u>	<u>\$1482.95</u>	
Address <u>WILLIAMS PRINTING</u>				
City <u>CHATTANOOGA</u>	State <u>TN</u> Zip Code <u>37402</u>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <u>WILLIAMS PRINTING</u>		<u>BULK MAILING, ADVERTISING</u>	<u>\$1397.08</u>	
Address <u>6129 AIRWAYS BLVD</u>				
City <u>CHATTANOOGA</u>	State <u>TN</u> Zip Code <u>37421</u>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <u>ACCENT PRINTING</u>		<u>PRINTING, ADVERTISING</u>	<u>\$286.52</u>	
Address <u>PO BOX 2318</u>				
City <u>CHATTANOOGA</u>	State <u>TN</u> Zip Code <u>37409</u>			
First Name <u>LIZ</u>	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <u>CLUM</u>		<u>REIMBURSEMENT FOR PRINTING COSTS</u>	<u>\$105.37</u>	
Address <u>130 JORDAN DRIVE</u>				
City <u>CHATTANOOGA</u>	State <u>TN</u> Zip Code <u>37421</u>			
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <u>WILLIAMS PRINTING</u>		<u>PRINTING, BULK MAILING</u>	<u>\$138.98</u>	
Address <u>6129 AIRWAYS BLVD</u>				
City <u>CHATTANOOGA</u>	State <u>TN</u> Zip Code <u>37421</u>			
First Name <u>JEFF</u>	Middle Name	Purpose of Expenditure	Amount of Expenditure	
Last Name/Business Name <u>ATHERTON</u>		<u>REIMBURSEMENT FOR EXPENDITURE FOR RADIO AD BUY, CITADEL BROADCAST</u>	<u>\$2113.00</u>	
Address <u>6107 MORNING GLORY DR</u>				
City <u>HARRISON</u>	State <u>TN</u> Zip Code <u>37341</u>			
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			<u>\$5,523.90</u>	



ITEMIZED STATEMENT OF EXPENDITURES - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE COMMITTEE TO ELECT JEFF ATTERTON			2. REPORT COVERING THE PERIOD FROM: 7/27/10 TO: 9/30/10		
3. TOTAL ITEMIZED CAMPAIGN EXPENDITURES FROM PRECEDING PAGE (enter \$0 if first itemized page)			Amount \$5523.90		
4. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED EXPENDITURE (expenditures totaling more than \$100 to any payee during the period)					
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name DOUBLE TREE HOTEL		RENTAL OF CONFERENCE ROOM	\$196.65		
Address 407 CHESTNUT STREET					
City CHATTANOOGA	State TN				Zip Code 37402
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
First Name	Middle Name	Purpose of Expenditure	Amount of Expenditure		
Last Name/Business Name					
Address					
City	State				Zip Code
5. TOTAL ITEMIZED EXPENDITURES (Carry forward to item 3. of next page if additional pages of this form are used.) (If this is the last page of expenditures, this amount must be shown in item 19b. of summary.)			\$5720.55		



ITEMIZED STATEMENT OF LOANS - CANDIDATE

1. NAME OF CANDIDATE OR COMMITTEE				2. REPORT COVERING THE PERIOD FROM: TO:			
3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period)							
Complete the Following for the Source of the Loan							
First Name <u>JEFFERY</u>		Middle Name <u>M</u>		Outstanding Loan Balance (Beginning of Period) <u>\$3100</u>		Loans Received <u>\$3100</u>	
Last Name/Organization Name <u>ATHERTON</u>				Loan Payments <u>\$3100</u>		Outstanding Loan Balance (End of Period) <u>\$0</u>	
Address <u>6107 MORNING GLOW DR</u>				Loan Received For: <input type="checkbox"/> Primary Election <input checked="" type="checkbox"/> General Election		Date of Loan <u>5/28/10, 7/6/10</u>	
City <u>HARRISW</u>		State <u>TX</u>		Zip Code <u>75341</u>			
				<input type="checkbox"/> Runoff (Local Elections Only)			
List All Endorsers or Guarantors for Above Loan (If more space is needed please attach a page)							
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
First Name		Middle Name		First Name		Middle Name	
Last Name/Organization Name				Last Name/Organization Name			
Address				Address			
City		State		Zip Code			
Amount Guaranteed Outstanding				Amount Guaranteed Outstanding			
4. Totals for all Loans (complete on last page of itemized loans)							
(Total loans received should also be shown in item 16, on summary page.)				Outstanding Loan Balance (Beginning of Period) <u>\$3100</u>		Loans Received <u>\$0</u>	
(Total loan payments should also be shown in item 20, on summary page.)				Loan Payments <u>\$3100</u>		Outstanding Loan Balance (End of Period) <u>\$0</u>	
(Total outstanding loan balance should also be shown in item 12.e, on front page.)							

